

RFQVA AMENDMENT	DEPARTMENT OF ECONOMIC SECURITY
RFQVA No: DDD 704011	Agency: Division of Developmental Disabilities
Amendment No: 5	Address: 1789 W. Jefferson, Site Code 791A Phoenix, Arizona 85005
Page 1 of 24	Phone: (602) 542-6874
A signed copy of the signature page (page 3) of this amendment must be included in the hard copy of the Application, or, if a Qualified Vendor Agreement has been awarded, the Qualified Vendor must return a signed copy of this amendment to:	
<p style="text-align: center;">Contract Management Section Business Operations – Site Code 791A Division of Developmental Disabilities Arizona Department of Economic Security P.O. Box 6123 Phoenix, Arizona 85005</p>	
The RFQVA is amended as follows:	
<u>Section 7 – SERVICE SPECIFICATIONS:</u>	
Page 7-25, Day Treatment and Training, Adult, Service Utilization Guidelines, item 2, is amended to delete “for a program day” as a conforming change	
Page 7-26, Day Treatment and Training, Adult, Rate, item 2, is amended to strike “daily” before “ratio” as a conforming change	
Page 7-26 and page 7-26(a), Day Treatment and Training, Adult, Unit of Service, item 1, is amended to clarify that the staff to consumer ratio may be calculated on a daily or monthly basis	
Page 7-26 (a), Day Treatment and Training, Adult, Unit of Service, item 2, is amended to add “for that day” at the end of the first paragraph as a conforming change	
Page 7-26 (a), Day Treatment and Training, Adult, Unit of Service, item 3, is amended to strike “daily” before “ratio” and make other conforming changes	
Page 7-30, Day Treatment and Training, Child (After-School), Service Utilization Guidelines, item 2, is amended to delete “for a program day” as a conforming change	
Page 7-31, Day Treatment and Training, Child (After-School), Rate, item 2, is amended to strike “daily” before “ratio” as a conforming change	
Page 7-31 and page 7-31(a), Day Treatment and Training, Child (After-School), Unit of Service, item 1, is amended to clarify that the staff to consumer ratio may be calculated on a daily or monthly basis	
Page 7-31(a), Day Treatment and Training, Child (After-School), Unit of Service, item 2, is amended to add “for that day” after the end of the first paragraph as a conforming change	

Page 7-35, Day Treatment and Training, Child (Summer), Service Utilization Guidelines, item 2, is amended to delete “for a program day” as a conforming change

Page 7-36, Day Treatment and Training, Child (Summer), Rate, item 2, is amended to strike “daily” before “ratio” as a conforming change

Page 7-36 and 7-36 (a), Day Treatment and Training, Child (Summer), Unit of Service, item 1, is amended to clarify that the staff to consumer ratio may be calculated on a daily or monthly basis

Page 7-36 (a), Day Treatment and Training, Child (Summer), Unit of Service, item 2, is amended to add “for that day” after the end of the first paragraph as a conforming change

Page 7-53, Habilitation, Community Protection and Treatment Group Home, Rate, is amended to:

In item 6, insert “a week in” after “the Qualified Vendor must provide in” as a conforming change

In item 7 clarify that the Qualified Vendor may calculate weekly direct service hours weekly or at the end of the month

Add a new item 8 to provide guidance on calculating weekly direct services hours at the end of the month

Renumber items 8 to 12 as a conforming change

Revise Example 2 as a conforming change

Page 7-61, Habilitation, Group Home, Rate, is amended to:

In item 4, insert “a week in” after “the Qualified Vendor must provide in” as a conforming change

In item 5 clarify that the Qualified Vendor may calculate weekly direct service hours weekly or at the end of the month

Add a new item 6 to provide guidance on calculating weekly direct services hours at the end of the month

Renumber items 6 to 9 as a conforming change

Revise Example 2 as a conforming change

Page 7-72, Room and Board, All Group Homes, Rate, item 4, is revised to allow billing for absences

Page 7-82, Nursing, Rate, is amended to add new item 2, which establishes modified rates if the Qualified Vendor must travel 50 or more miles one way to provide this service to a consumer

Page 7-111, Transportation, Rate, is amended to add a new item 5, which establishes modified rates for exceptional transportation services, and to renumber item 5 as item 6 as a conforming change

The following pages are attached:

Revised SECTION 7 – SERVICE SPECIFICATIONS, pages 7-25 to 7-26(a), 7-30 to 7-31(a), 7-35 to 7-36(a), 7-53 to 7-55(a), 7-61 to 7-62, 7-72, 7-82 to 7-82(a), and 7-111 to 7-112

EXCEPT AS PREVIOUSLY AMENDED, ALL OTHER PROVISIONS OF THE RFQVA SHALL REMAIN IN THEIR ENTIRETY.

NOTE: CONCURRENT WITH THE RELEASE OF THIS AMENDMENT THE DIVISION OF DEVELOPMENTAL DISABILITIES IS PUBLISHING REVISED RATE SCHEDULES (VERSION 4) THAT INCLUDE NEW RATES FOR NURSING AND FOR TRANSPORTATION

THE EXPLANATIONS CONTAINED IN THE SCHEDULES HAVE BEEN AMENDED TO CONFORM WITH THE AMENDMENTS TO THE RFQVA.

Applicant hereby acknowledges receipt and understanding of the above RFQVA amendment.

Signature

Date

Typed Name and Title

Name of Company

The above referenced RFQVA Amendment is hereby executed this 1st day of December, 2003, at Phoenix, Arizona.

Antonia Valladares
DDD Procurement Specialist

4. Assist each consumer in developing methods of starting and maintaining friendships of his/her choice, as well as appropriate assertiveness, social skills, and problem solving abilities for use in daily interactions.
5. Provide opportunities for consumers to participate in community activities and facilitate consumer utilization of community resources.
6. Provide transportation necessary to support program activities.
7. Develop a monthly on-site/community integrated schedule of daily activities and document consumers' direct input into the monthly schedule. Daily activities and schedules are based on consumer choice, developmental level, ISP goals, and enrichment of life experiences. Allow for reasonable choice in activity participation, and offer alternative activities. This schedule shall be available to consumers, consumer representatives, or others upon request.
8. Play an active role in ensuring that services with other involved entities, including group homes, health care providers, and schools are coordinated to meet the needs of the consumers served.
9. When appropriate, provide consumers opportunities to earn money as part of habilitative learning objectives.
10. Partner with the Division to conduct program reviews to assess performance in meeting all identified tasks, promote quality improvement, and encourage best practices. Such reviews shall include participation of consumers served, families, and all other interested parties. The frequency of the reviews shall be determined by the Division.

Service Utilization Guidelines

1. Typical usage is up to seven units per day; direct service time associated with providing transportation to/from the program is included in the "Flat Trip Rate for Regularly Scheduled Daily Transportation" rate.
2. This service will generally be authorized at the 1:2.5 to 1:4.5 staff to consumer ratio rate for each consumer. However, the Qualified Vendor's claims for each consumer (excluding behaviorally or medically intense consumers with a specially authorized rate) shall reflect the actual staff to consumer ratio (excluding hours related to behaviorally or medically intense consumers who have a specially authorized rate).
3. Service to adults and children shall be provided separately through the age of 15. Upon age 16, transition plans shall be individually developed, and may permit the provision of services to children concurrently with adults with parental consent.

Rate

1. Published.
2. The ratio rate for this service is established through the ratio of total direct service staff hours with consumers present at the program to total consumer hours.
3. The Division established a separate rate for this service in the rural areas of the state. This modified rate has a premium over the standard rate for this service. The Qualified Vendor shall bill the Division this modified rate only after it receives authorization from the DDD Program Administrator/Manager or designee. The general guideline for authorizing the modified rate for rural areas is that the potential client base of the program size has fewer than 20 consumers in a 40 mile radius.
4. The Division established a separate rate for this service to behaviorally or medically intense consumers. Special authorization for these consumers is required by the DDD Program Administrator/Manager or designee. The rate is equal to the adopted Habilitation, Support rate in the published rate schedule. The hours for these consumers and the direct service staff hours related to the behaviorally or medically intense consumers shall not be considered in determining the overall program staffing ratio for the remaining consumers.

Unit of Service

1. The basis of payment for this service is the ratio rate. To determine the appropriate billing rate, the Qualified Vendor shall:
 - a. Divide (the total billable hours consumers attended the program including hours allowed pursuant to item 3 below, excluding hours for behaviorally or medically intense consumers with a specially authorized rate) by (the total direct service staff hours with consumers present at the program, excluding hours related to behaviorally or medically intense consumers with a specially authorized rate); and
 - b. Use the resulting quotient, which is the number of consumer billable hours per direct service staff hours and can be stated as "1: (result from step a.)" staff to consumer ratio, to find the appropriate staff to consumer ratio rate on the rate schedule.
 - c. The Qualified Vendor may calculate this ratio on a daily basis using actual hours for each day or may calculate the ratio at the end of the calendar month using the actual number of hours for the entire month to determine an average ratio for the month.

For example, if the number of hours attended by all consumers in a program plus the hours allowed pursuant to item 3 below (excluding behaviorally or medically intense consumers with a specially authorized rate) totaled 110 hours for a day (2,200 for the month), and the number of hours worked by direct service staff when consumers were present at the program (excluding hours related to behaviorally or medically intense consumers with a specially authorized rate) totaled 28 for that day (560 for the month), then the calculation would be:

- Total billable consumer hours divided by total direct service staff hours = $110 / 28$ or $2,200 / 560 = 3.928$
- This program's ratio is 1:3.928

For both consumers and direct service staff, units shall be recorded daily on the *per consumer* and *per direct service staff* basis, shall be expressed in terms of hours and shall be rounded to the nearest hour, as illustrated in examples below:

- If total hours for a consumer or direct service staff were equal to 3 hours and 5 minutes, round the total to 3 hours
- If total hours for a consumer or direct service staff were equal to 5 hours and 24 minutes, round the total to 5 hours
- If total hours for a consumer or direct service staff were equal to 5 hours and 30 minutes, round the total to 6 hours
- If total hours for a consumer or direct service staff were equal to 6 hours and 48 minutes, round the total to 7 hours

2. Absences do not constitute a billable unit except as provided in item 3 below. An absence factor was built into the model rates. The Division will not compensate Qualified Vendors for any absences. For example, if a consumer stays in the day program for two hours in the morning, then leaves for two hours, and then returns for three hours, and all activity takes place within the same program day, total hours for this consumer shall be equal to five for that day.

If the consumer permanently stops attending the Qualified Vendor's facility, then the Qualified Vendor shall notify the DDD Program Administrator/Manager or designee. The Qualified Vendor shall not bill the Division for vacancies.

3. Qualified Vendors that do not provide transportation for a particular consumer may include up to one hour per day if that consumer arrives after his/her scheduled arrival time on that day or if that consumer leaves before his/her scheduled departure time on that day. The calculation of the ratio will use the billable hours. However, if the client is absent for the entire day, the Qualified Vendor may not include hours for that day for that client in the ratio. In no event shall the Qualified Vendor submit a claim for more than the number of hours authorized for that consumer.

4. Assist each consumer in developing methods of starting and maintaining friendships of his/her choice, as well as appropriate assertiveness, social skills, and problem solving abilities for use in daily interactions.
5. Provide opportunities for consumers to participate in community activities and facilitate consumer utilization of community resources.
6. Provide transportation necessary to support program activities.
7. Develop a monthly on-site/community integrated schedule of daily activities and document the consumer's direct input into the monthly schedule. Daily activities and schedules are based on the consumer's choice, developmental level, ISP goals, and enrichment of life experiences. Allow for reasonable choice in activity participation, and offer alternative activities. This schedule shall be available to the consumer, consumer's representative, or others upon request.
8. Play an active role in ensuring that services with other involved entities, including group homes, health care providers, and schools are coordinated to meet the needs of the consumers served.
9. Partner with the Division to conduct program reviews to assess performance in meeting all identified tasks, promote quality improvement, and encourage best practices. Such reviews shall include participation of consumers served, families, and all other interested parties. The frequency of the reviews shall be determined by the Division.

Service Utilization Guidelines

1. Typical usage is up to four units per day on school days; direct service time associated with providing transportation to/from the program is included in the "Flat Trip Rate for Regularly Scheduled Daily Transportation" rate.
2. This service will generally be authorized at the 1:2.5 to 1:4.5 staff to consumer ratio rate for each consumer. However, the Qualified Vendor's claims for each consumer (excluding behaviorally or medically intense consumers with a specially authorized rate) shall reflect the actual staff to consumer ratio (excluding hours related to behaviorally or medically intense consumers who have a specially authorized rate).
3. Service to children shall be provided separately through the age of 15. Upon age 16, transition plans shall be individually developed, and may permit the provision of services to children concurrently with adults with parental consent.

Rate

1. Published.
2. The ratio rate for this service is established through the ratio of total direct service staff hours with consumers present at the program to total consumer hours.
3. The Division established a separate rate for this service to behaviorally or medically intense consumers. Special authorization for these consumers is required by the DDD Program Administrator/Manager or designee. The rate is equal to the adopted Habilitation, Support rate in the published rate schedule. The hours for these consumers and the direct service staff hours related to the behaviorally or medically intense consumers shall not be considered in determining the overall program staffing ratio for the remaining consumers.

Unit of Service

1. The basis of payment for this service is the ratio rate. To determine the appropriate billing rate, the Qualified Vendor shall:
 - a. Divide (the total hours consumers, excluding hours for behaviorally or medically intense consumers with a specially authorized rate, attended the program) by (the total direct service staff hours with consumers present at the program, excluding hours related to behaviorally or medically intense consumers with a specially authorized rate); and
 - b. Use the resulting quotient, which is the number of consumer hours per direct service staff hours and can be stated as "1: (result from step a.)" staff to consumer ratio, to find the appropriate staff to consumer ratio rate on the rate schedule.
 - c. The Qualified Vendor may calculate this ratio on a daily basis using actual hours for each day or may calculate the ratio at the end of the calendar month using the actual number of hours for the entire month to determine an average ratio for the month.

For example, if the number of hours attended by all consumers (excluding behaviorally or medically intense consumers with a specially authorized rate) in a program totaled 110 hours for a day (2,200 for the month), and the number of hours worked by direct service staff when consumers were present at the program (excluding hours related to behaviorally or medically intense consumers with a specially authorized rate) totaled 28 for that day (560 for the month), then the calculation would be:

- ☐ Total consumer hours divided by total direct service staff hours = $110 / 28$
or $2,200 / 560 = 3.928$
- ☐ This program's ratio is 1:3.928

For both consumers and direct service staff, units shall be recorded daily on the *per consumer* and *per direct service staff* basis, shall be expressed in terms of hours and shall be rounded to the nearest hour, as illustrated in examples below:

- ❑ If total hours for a consumer or direct service staff were equal to 3 hours and 5 minutes, round the total to 3 hours
- ❑ If total hours for a consumer or direct service staff were equal to 5 hours and 24 minutes, round the total to 5 hours
- ❑ If total hours for a consumer or direct service staff were equal to 5 hours and 30 minutes, round the total to 6 hours
- ❑ If total hours for a consumer or direct service staff were equal to 6 hours and 48 minutes, round the total to 7 hours

2. The Division will not compensate Qualified Vendors for any absences. For example, if a consumer stays in the day program for two hours in the morning, then leaves for two hours, and then returns for three hours, and all activity takes place within the same program day, total hours for this consumer shall be equal to five for that day.

If the consumer permanently stops attending the Qualified Vendor's facility, then the Qualified Vendor shall notify the DDD Program Administrator/Manager or designee. The Qualified Vendor shall not bill the Division for vacancies.

4. Assist each consumer in developing methods of starting and maintaining friendships of his/her choice, as well as appropriate assertiveness, social skills, and problem solving abilities for use in daily interactions.
5. Provide opportunities for consumers to participate in community activities and facilitate consumer utilization of community resources.
6. Provide transportation necessary to support program activities.
7. Develop a monthly on-site/community integrated schedule of daily activities and document the consumer's direct input into the monthly schedule. Daily activities and schedules are based on the consumer's choice, developmental level, ISP goals, and enrichment of life experiences. Allow for reasonable choice in activity participation, and offer alternative activities. This schedule shall be available to the consumer, consumer's representative, or others upon request.
8. Play an active role in ensuring that services with other involved entities, including group homes, health care providers, and schools are coordinated to meet the needs of the consumers served.
9. Partner with the Division to conduct program reviews to assess performance in meeting all identified tasks, promote quality improvement, and encourage best practices. Such reviews shall include participation of consumers served, families, and all other interested parties. The frequency of the reviews shall be determined by the Division.

Service Utilization Guidelines

1. Typical usage is up to four units per day during summer vacation; direct service time associated with providing transportation to/from the program is included in the "Flat Trip Rate for Regularly Scheduled Daily Transportation" rate.
2. This service will generally be authorized at the 1:2.5 to 1:4.5 staff to consumer ratio rate for each consumer. However, the Qualified Vendor's claims for each consumer (excluding behaviorally or medically intense consumers with a specially authorized rate) shall reflect the actual staff to consumer ratio (excluding hours related to behaviorally or medically intense consumers who have a specially authorized rate).
3. Service to children shall be provided separately through the age of 15. Upon age 16, transition plans shall be individually developed, and may permit the provision of services to children concurrently with adults with parental consent.

Rate

1. Published.
2. The ratio rate for this service is established through the ratio of total direct service staff hours with consumers present at the program to total consumer hours.
3. The Division established a separate rate for this service to behaviorally or medically intense consumers. Special authorization for these consumers is required by the DDD Program Administrator/Manager or designee. The rate is equal to the adopted Habilitation, Support rate in the published rate schedule. The hours for these consumers and the direct service staff hours related to the behaviorally or medically intense consumers shall not be considered in determining the overall program staffing ratio for the remaining consumers.

Unit of Service

1. The basis of payment for this service is the ratio rate. To determine the appropriate billing rate, the Qualified Vendor shall:
 - a. Divide (the total hours consumers, excluding hours for behaviorally or medically intense consumers with a specially authorized rate, attended the program) by (the total direct service staff hours with consumers present at the program, excluding hours related to behaviorally or medically intense consumers with a specially authorized rate); and
 - b. Use the resulting quotient, which is the number of consumer hours per direct service staff hours and can be stated as "1: (result from step a.)" staff to consumer ratio, to find the appropriate staff to consumer ratio rate on the rate schedule.
 - c. The Qualified Vendor may calculate this ratio on a daily basis using actual hours for each day or may calculate the ratio at the end of the calendar month using the actual number of hours for the entire month to determine an average ratio for the month.

For example, if the number of hours attended by all consumers (excluding behaviorally or medically intense consumers with a specially authorized rate) in a program totaled 110 hours for a day (2,200 for the month), and the number of hours worked by direct service staff when consumers were present at the program (excluding hours related to behaviorally or medically intense consumers with a specially authorized rate) totaled 28 for that day (560 for the month), then the calculation would be:

- ❑ Total consumer hours divided by total direct service staff hours = $110 / 28$
or $2,200 / 560 = 3.928$
- ❑ This program's ratio is 1:3.928

For both consumers and direct service staff, units shall be recorded daily on the *per consumer* and *per direct service staff* basis, shall be expressed in terms of hours and shall be rounded to the nearest hour, as illustrated in examples below:

- ❑ If total hours for a consumer or direct service staff were equal to 3 hours and 5 minutes, round the total to 3 hours
- ❑ If total hours for a consumer or direct service staff were equal to 5 hours and 24 minutes, round the total to 5 hours
- ❑ If total hours for a consumer or direct service staff were equal to 5 hours and 30 minutes, round the total to 6 hours
- ❑ If total hours for a consumer or direct service staff were equal to 6 hours and 48 minutes, round the total to 7 hours

2. The Division will not compensate Qualified Vendors for any absences. For example, if a consumer stays in the day program for two hours in the morning, then leaves for two hours, and then returns for three hours, and all activity takes place within the same program day, total hours for this consumer shall be equal to five for that day.

If the consumer permanently stops attending the Qualified Vendor's facility, then the Qualified Vendor shall notify the DDD Program Administrator/Manager or designee. The Qualified Vendor shall not bill the Division for vacancies.

Rate

1. Published.
2. If at least one of the residents in the facility is authorized to receive this service, the Qualified Vendor may bill the Division the Habilitation, Community Protection and Treatment Group Home rate for all residents in the facility.
3. If the resident that requires Habilitation, Community Protection and Treatment Group Home direct service hours moves out of the facility, the Qualified Vendor may continue to bill the Division at the Habilitation, Community Protection and Treatment Group Home rate for the reduced number of residents for a 60 day period, at which point the facility will be delivering Habilitation, Group Home services.
4. The daily rate for this service is established through an Adopted Rate Matrix for Habilitation, Community Protection and Treatment Group Home, and is based on Staff Hour unit of service. Staff Hours are the hours provided by the Qualified Vendor that the Division authorizes the Qualified Vendor to schedule and provide at the service site to assure health, safety, and the delivery of habilitation services to the residents.
5. The Division will make payments to the Qualified Vendor on the *per diem* basis based on the hourly rate for the Staff Hour unit of service, the number of residents in the home, and the direct service hours provided up to the number of authorized direct service hours for the home. The adopted rate does not include incontinent supplies or nutritional supplements, which shall be billed separately. These modifiers will be approved by the Division on a case-by-case basis, and the Qualified Vendor will be paid for these expenses in addition to the *per diem* rate and only for those residents that require them.
6. The Adopted Rate Matrix for Habilitation, Community Protection and Treatment Group Home is composed of ranges representing the number of direct service hours that may be authorized by the Division to be provided by the Qualified Vendor at a particular group home during a week. A week is a consecutive seven day stretch of time that begins at midnight on Sunday and ends at 11:59 p.m. the following Saturday. The Adopted Rate Matrix for Habilitation, Community Protection and Treatment Group Home contains 14 ranges, each of which specifies the number of direct service hours the Qualified Vendor must provide in a week in order to bill the *per diem* rates associated with that range. This Matrix is statewide for all Habilitation, Community Protection and Treatment Group Homes. The Adopted Rate Matrix for Habilitation, Community Protection and Treatment Group Home illustrates the span of direct service hours associated with each authorized range.

7. The Qualified Vendor shall invoice for payment for each consumer the *per diem* rate on the Adopted Rate Matrix for Habilitation, Community Protection and Treatment Group Home that reflects the number of residents in the group home and the range of hours provided in a week that reflect the lesser of 1) the authorized direct service hours, or 2) the actual direct service hours delivered. The Qualified Vendor may calculate the weekly direct service hours weekly, or may calculate a monthly average of weekly direct service hours at the end of the month for that month.
8. If the Qualified Vendor elects to calculate a monthly average of weekly direct service hours at the end of the month, the Qualified Vendor shall determine the total number of direct service hours in a given month and determine the average number of direct service hours per week by dividing (the total number of direct service hours in a month) by (the number of weeks in a month).
 - ☐ If there are 31 days in a month, then the number of weeks in a month is 4.43
 - ☐ If there are 30 days in a month, then the number of weeks in a month is 4.29
 - ☐ If there are 29 days in a month, then the number of weeks in a month is 4.14
 - ☐ If there are 28 days in a month, then the number of weeks in a month is 4.00
9. The *per diem* rates paid to a Qualified Vendor with multiple homes will vary among homes according to the authorized direct service hours, actual direct service hours provided, and number of residents at each group home.
10. Because direct service hours provided can vary by week (if the Qualified Vendor does not elect to calculate a monthly average of weekly direct service hours), and the number of occupants can vary both by week and within a week, the Qualified Vendor may bill more than one *per diem* rate for each resident on their monthly invoice, but none of the rates billed shall be in excess of the rate which reflects the number of authorized direct service hours.
11. The Qualified Vendor shall use the actual resident occupancy to determine the *per diem* rate to be billed to the Division. The actual resident occupancy includes all residents, whether or not they are funded by the Division. The Qualified Vendor must notify the DDD Program Administrator/Manager or designee about movement into or out of a home by any resident, whether or not funded by the Division. The Division shall determine if direct service hours will be adjusted on a temporary or permanent basis to reflect the need for direct service hours.
12. If a resident is not in the group home facility on a particular day, the Qualified Vendor shall not bill the Division for this resident. In this situation, the Qualified Vendor shall bill the Division the *per diem* rate for the actual number of Division-funded residents.

Examples below illustrate some of the scenarios that the Qualified Vendor may come across over the course of providing direct service services to their consumers.

Example 1: Typical Billing

Using Range 6 of the Adopted Rate Matrix for Habilitation, Community Protection and Treatment Group Home as reflective of both the authorized range and the number of direct service hours delivered, and assuming three residents were present in the group home, the applicable *per diem* rate per resident would be \$134.40.

Example 2: Qualified Vendor Provides More/Fewer Hours than Authorized

Using Range 8 of the Adopted Rate Matrix for Habilitation, Community Protection and Treatment Group Home as reflective of the authorized range, the Qualified Vendor is authorized to provide between 190 and 210 hours of direct service per week. As long as the Qualified Vendor's direct service hours are within this range (whether those hours are actual weekly direct service hours or are a monthly average of weekly direct service hours), the Qualified Vendor will bill the division a *per diem* rate equivalent to that shown in Range 8. If, however, the Qualified Vendor delivers 185 direct hours, or fewer than the low end of Range 8, the Qualified Vendor will bill the *per diem* rate at Range 7, or the range reflecting the actual direct service hours that were delivered.

On the other hand, if the Qualified Vendor delivers 215 of direct service hours (whether those hours are actual weekly direct service hours or are a monthly average of weekly direct service hours), or more than those authorized in Range 8 (equivalent to 210 hours), the Qualified Vendor will continue to bill the *per diem* rate at Range 8, or the range reflecting the direct service hours that were authorized by the Division.

Example 3: Different Number of Residents

Using Range 6 of the Adopted Rate Matrix for Habilitation, Community Protection and Treatment Group Home as reflective of both the authorized range and the number of direct service hours delivered, and assuming three residents were present in the group home, the applicable *per diem* rate per resident would be \$134.40.

Assume on day two of the week one resident leaves, until an adjustment is made and unless the Qualified Vendor reduces the number of direct service hours for the remaining two residents, the Qualified Vendor shall bill the Division a *per diem* rate based the authorized range of hours (Range 6) and two residents. Therefore, starting with day two of the week and until an adjustment is made in the authorized direct service hours, the Qualified Vendor shall bill the Division a *per diem* rate of \$201.60 for the remaining two residents.

Unit of Service

One unit of service equals one hour (60 minutes) of direct service time. Direct service time is the period of time spent with or on behalf of the consumer and can be verified by consumer attendance records and includes transportation time spent with consumers during daily activities. This unit of service is converted to a daily rate for billing purposes.

Direct Service Staff Qualifications

1. Direct service staff must:
 - 1.1 Have at least three months experience implementing and documenting performance in individual programs (specific training strategies);
 - 1.2 Have both three months experience in providing either respite or personal care and have received training, approved by the Division, in implementing and documenting performance; or
 - 1.3 Perform three months of habilitation services under the direct supervision of an individual who is qualified to provide habilitation as described above.

for the home. The adopted rate does not include incontinent supplies or nutritional supplements, which shall be billed separately. These modifiers will be approved by the Division on a case-by-case basis, and the Qualified Vendor will be paid for these expenses in addition to the *per diem* rate and only for those residents that require them.

4. The Adopted Rate Matrix for Habilitation, Group Home is composed of ranges representing the number of direct service hours that may be authorized by the Division to be provided by the Qualified Vendor at a particular group home during a week. A week is a consecutive seven day stretch of time that begins at midnight on Sunday and ends at 11:59 p.m. the following Saturday. The Adopted Rate Matrix for Habilitation, Group Home contains 14 ranges, each of which specifies the number of direct service hours the Qualified Vendor must provide in a week in order to bill the *per diem* rates associated with that range. This Matrix is statewide for all Habilitation, Group Homes. The Adopted Rate Matrix for Habilitation, Group Home illustrates the span of direct service hours associated with each authorized range.
5. The Qualified Vendor shall invoice for payment for each consumer the *per diem* rate on the Adopted Rate Matrix for Habilitation, Group Home that reflects the number of residents in the group home and the range of hours provided in a week that reflect the lesser of 1) the authorized direct service hours, or 2) the actual direct service hours delivered. The Qualified Vendor may calculate the weekly direct service hours weekly, or may calculate a monthly average of weekly direct service hours at the end of the month for that month.
6. If the Qualified Vendor elects to calculate a monthly average of weekly direct service hours at the end of the month, the Qualified Vendor shall determine the total number of direct service hours in a given month and determine the average number of direct service hours per week by dividing (the total number of direct service hours in a month) by (the number of weeks in a month).
 - ☐ If there are 31 days in a month, then the number of weeks in a month is 4.43
 - ☐ If there are 30 days in a month, then the number of weeks in a month is 4.29
 - ☐ If there are 29 days in a month, then the number of weeks in a month is 4.14
 - ☐ If there are 28 days in a month, then the number of weeks in a month is 4.00
7. The *per diem* rates paid to a Qualified Vendor with multiple homes will vary among homes according to the authorized direct service hours, actual direct service hours provided, and number of residents at each group home.

8. Because direct service hours provided can vary by week (if the Qualified Vendor does not elect to calculate a monthly average of weekly direct service hours), and the number of occupants can vary both by week and within a week, the Qualified Vendor may bill more than one *per diem* rate for each resident on their monthly invoice, but none of the rates billed shall be in excess of the rate which reflects the number of authorized direct service hours.
9. The Qualified Vendor shall use the actual resident occupancy to determine the *per diem* rate to be billed to the Division. The actual resident occupancy includes all residents, whether or not they are funded by the Division. The Qualified Vendor must notify the DDD Program Administrator/Manager or designee about movement into or out of a home by any resident, whether or not funded by the Division. The Division shall determine if direct service hours will be adjusted on a temporary or permanent basis to reflect the need for direct service hours.
10. If a resident is not in the group home facility on a particular day, the Qualified Vendor shall not bill the Division for this resident. In this situation, the Qualified Vendor shall bill the Division the *per diem* rate for the actual number of Division-funded residents.

Examples below illustrate some of the scenarios that the Qualified Vendor may come across over the course of providing direct service services to their consumers.

Example 1: Typical Billing

Using Range 6 of the Adopted Rate Matrix for Habilitation, Group Home as reflective of both the authorized range and the number of direct service hours delivered, and assuming five residents were present in the group home, the applicable *per diem* rate per resident would be \$72.55.

Example 2: Qualified Vendor Provides More/Fewer Hours than Authorized

Using Range 8 of the Adopted Rate Matrix for Habilitation, Group Home as reflective of the authorized range, the Qualified Vendor is authorized to provide between 190 and 210 hours of direct service per week. As long as the Qualified Vendor's direct service hours are within this range (whether those hours are actual weekly direct service hours or are a monthly average of weekly direct service hours), the Qualified Vendor will bill the division a *per diem* rate equivalent to that shown in Range 8. If, however, the Qualified Vendor delivers 185 direct hours, or fewer than the low end of Range 8, the Qualified Vendor will bill the *per diem* rate at Range 7, or the range reflecting the actual direct service hours that were delivered.

On the other hand, if the Qualified Vendor delivers 215 of direct service hours (whether those hours are actual weekly direct service hours or are a monthly average of weekly direct service hours), or more than those authorized in Range 8 (equivalent to 210 hours), the Qualified Vendor will continue to bill the *per diem* rate at Range 8, or the range reflecting the direct service hours that were authorized by the Division.

Example 3: Different Number of Residents

Using Range 6 of the Adopted Rate Matrix for Habilitation, Group Home as reflective of both the authorized range and the number of direct service hours delivered, and assuming five residents were present in the group home, the applicable *per diem* rate per resident would be \$72.55.

Assume on day two of the week one resident leaves, until an adjustment is made and unless the Qualified Vendor reduces the number of direct service hours for the remaining four residents, the Qualified Vendor shall bill the Division a *per diem* rate based the authorized range of hours (Range 6) and four residents. Therefore, starting with day two of the week and until an adjustment is made in the authorized direct service hours, the Qualified Vendor shall bill the Division a *per diem* rate of \$90.69.

Unit of Service

One unit of service equals one hour (60 minutes) of direct service time. Direct service time is the period of time spent with or on behalf of the consumer and can be verified by consumer attendance records and includes transportation time spent with consumers during daily activities. This unit of service is converted to a daily rate for billing purposes.

- 4.2 When cost share agreements are made by the Division with a behavioral health entity to pay for room and board services as part of “wrap around” services for a consumer.

Service Utilization Guidelines

Reserved.

Rate

1. Published.
2. The Qualified Vendor shall bill the Division monthly using contracted *per diem* rates for each consumer funded by the Division. There are separate *per diem* rates for District 1, District 2, District 3, and one common *per diem* rate for Districts 4, 5 and 6. A Qualified Vendor with multiple facilities in different districts will have different *per diem* rates based on the Daily Rate Matrix for each district. Within each District, the *per diem* rates are based on the capacity contracted by the Division from a Qualified Vendor and actual occupancy at 11:59 p.m. of each day.
3. The Daily Rate Matrix is composed of Rows that represent the contracted capacity in a Qualified Vendor’s facility and Columns that represent the number of actual occupants. To determine the occupancy at a Qualified Vendor’s facility, all residents in that facility will be counted, whether or not they are funded by the Division. For example, if the Division contracts with a Qualified Vendor with a capacity of five for the needs of the Division, and there are four Division consumers in the facility and another resident who is not funded by the Division, the Qualified Vendor shall bill the Division a *per diem* rate based on the occupancy of five.
4. If a resident is absent from the Qualified Vendor’s facility, the Qualified Vendor shall bill the Division for this resident. However, the Qualified Vendor shall not bill the Division for vacancies. An absence is when the consumer is not at the Qualified Vendor’s facility but is expected to return. A vacancy is when a consumer is no longer a resident of the Qualified Vendor’s facility.

Unit of Service

One unit equals one day (24 hours). If the consumer is a resident at 11:59 p.m. on a given day, the Qualified Vendor may bill that day for that consumer.

Service Utilization Guidelines

1. Nursing will be authorized based on the nursing needs assessment conducted by the Division's managed care unit.
2. This service is provided on an intermittent (short-term) or continuous basis. The allocation of nursing service hours is authorized by the managed care nurse, based on the nursing assessment, which will be included in the consumer's ISP.
3. The Division's managed care unit will conduct nursing assessments at least annually, or more frequently if required by the Division, to reassess need for this service.
4. Prior to initiating the service, the Qualified Vendor shall obtain written orders from the consumer's primary care physician (PCP) or physician of record. The written physician orders will be renewed every 62 days (bimonthly).

Rate

1. Published.
2. The Division has established modified rates for Nursing, Short Term and Nursing, Continuous for when the Qualified Vendor or direct service staff must travel 50 or more miles one way to provide this service to a consumer. While the Division prefers to have nurses close to a consumer's home, it is anticipated that occasionally there will be consumers who live where there are no nurses close by and nurses must travel 50 or more miles one way to provide services. If the Qualified Vendor or direct service staff must travel 50 or more miles one way to provide services, for each unit of service delivered on each discrete trip the Qualified Vendor shall bill the Division the rate that corresponds to the traveled distance as provided on the rate schedule. The distance is calculated from the Qualified Vendor's principle place of business to the location of the nursing service (generally the consumer's home). These modified rates may also be used for multiple clients.

Unit of Service

1. The basis of payment for Nursing, Short Term is an hourly unit of direct service time. Direct service time is the period of time spent with or on behalf of the consumer and verified by the consumer. When billing, the Qualified Vendor should round its direct service time to the nearest 15-minute increment, as illustrated in the examples below:
 - ☐ If services were provided for 65 minutes, bill for 1 hour.
 - ☐ If services were provided for 68 minutes, bill for 1.25 hour.
 - ☐ If services were provided for 50 minutes, bill for 0.75 hour.

2. If the Qualified Vendor provides nursing for 16 or more hours in one day, this is considered to be Nursing, Continuous. One unit of service for Nursing, Continuous equals one day (16 or more hours in a 24-hour period) of direct service. A Qualified Vendor billing for Nursing, Continuous shall bill for the appropriate number of days of service and include the actual cumulative hours of service provided on the billing document as required by the Division.

If the Qualified Vendor provides nursing for 24 hours and the same nurse provides the service and is able to sleep eight hours, this is billed as Nursing, Continuous. However, if the needs of the consumer require 24 hours of awake skilled care, then this is billed as Nursing, Short Term.

Skilled hourly nursing and nursing respite may be combined. However, if the primary caregivers are out of the home for 24 hours or more, the skilled hourly nursing becomes respite and is billed as Nursing, Continuous.

3. If the Qualified Vendor provides this service with a single direct service staff person to multiple consumers at the same time, the basis of payment for each consumer will be the total direct service time multiplied by the appropriate multiple client rate for the same unit of service. In no event will more than three consumers receive this service with a single direct service staff person at the same time.

6. When a consumer needs transportation services, the Qualified Vendor will be contacted with information relative to the dates and times service is needed, pick up and drop off points and if an aide or wait time will be needed.
7. Typical utilization would not exceed two one-way trips per day.

Rate

1. Published.
2. Separate urban and rural rates and procedure codes are established for transportation services. Except for “Flat Trip Rate for Regularly Scheduled Daily Transportation,” urban transports are those that originate within the Phoenix and Tucson metropolitan areas. All other transports that are not “Flat Trip Rate for Regularly Scheduled Daily Transportation” are defined as rural.
3. The “Flat Trip Rate for Regularly Scheduled Daily Transportation” rate can only be used, and shall be the only rate used, for transportation of a consumer to a day treatment and training program by a Qualified Vendor that is not an independent provider.
4. Separate urban and rural rates are established for the “Flat Trip Rate for Regularly Scheduled Daily Transportation.” The Qualified Vendor shall bill the Division the rural rate only after it receives authorization from the DDD Program Administrator/Manager or designee. The general guideline for authorizing the rural “Flat Trip Rate for Regularly Scheduled Daily Transportation” rate for rural areas is that the potential Day Treatment and Training client base of the program size has fewer than 20 consumers in a 40 mile radius.
5. The following exceptional transportation modified rates are established for “Flat Trip Rate for Regularly Scheduled Daily Transportation:”
 - 5.1 Single Person Modified Rate
 - 5.1.1 This modified rate is to be used when a consumer has significant transportation needs associated with behavior needs (e.g. needs an aide to ride on the vehicle), wheelchair or other equipment needs or location and needs a single person transport.
 - 5.1.2 Separate urban and rural rates are established.
 - 5.1.3 The DDD Program Administer/Manager, Central Office Business Operations and Program Operations must approve the request for a single person modified rate. The request needs to include an explanation of what the consumer’s support needs are and what alternatives were explored, such as vendor calls or finding routes that the consumer can share a ride with others.

5.2 Extensive Distance Modified Rate

- 5.2.1 This modified rate is to be used when a consumer must travel 25 to 90 miles one way to attend a day program.
- 5.2.2 Separate urban and rural rates are established.
- 5.2.3 The DDD program Administrator/Manager, Central Office Business Operations, and Program Operations must approve the request for an extensive distance modified rate. The request must include an explanation of all alternatives researched such as finding a day program closer to the consumer's home, developing a new program tailored to the consumer's needs and in their home community, etc.

5.3 Those situations where these modified rates are used will be considered time-limited in order to seek day programs closer to a consumer's home long term or to develop an alternative so that consumers are not transported so much of their day.

5.4 Based on the premise that these are temporary or transitional modified rates, these modified rates are capped at 50 consumers statewide annually.

- 6. The "Non-Emergency Transportation, Family and Friend" rate can only be used, and shall be the only rate used, for transportation of a consumer by an independent individual provider, regardless of whether that provider is or is not a Qualified Vendor.

Unit of Service

- 1. One unit of service equals one trip per person one way, one mile of traveled distance, or 30 minutes of waiting time.
- 2. Mileage reimbursement is limited to loaded mileage. Loaded mileage is the distance traveled, measured in statute miles, while a consumer is on board and being transported.

Direct Service Staff Qualifications

Drivers shall be over the age of eighteen, have the appropriate training, license and endorsement for the vehicle being used.

Recordkeeping and Reporting Requirements

- 1. The provider shall maintain copies of vehicles maintenance records and safety inspections on file.
- 2. The provider shall record services delivered to each consumer, submit them to Division designee, and maintain copies on file. The records shall include, at a minimum by consumer, the consumer's name and ASSISTS identification number, date of service, mileage, and pick up and drop off times. The records must be signed by the consumer, family or consumer's representative as verification of services provided.